



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
DEPARTMENT OF STATE
DIVISION OF PROFESSIONAL REGULATION
BOARD OF VETERINARY MEDICINE

TELEPHONE: (302) 744-4500
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APPLICATION FOR LICENSURE/EXAMINATION FOR VETERINARY TECHNICIANS INSTRUCTION SHEET

General Information

Read this entire Instruction Sheet carefully. **Failure to follow these instructions may delay your examination or licensure.** The application asks whether you are applying by examination or reciprocity. This depends on whether you hold a current license in another jurisdiction (state, U.S. territory or District of Columbia)

IF you have...	AND IF you have...	THEN apply by...
<ul style="list-style-type: none"> • <i>never</i> held a veterinary technician license in another jurisdiction, or • held a license(s) in another jurisdiction(s) but <i>none is current</i> 	not passed the VTNE	Examination.
	already passed the VTNE	Examination.
hold a <i>current, active</i> veterinary technician license in another jurisdiction	--	Reciprocity.

Important Information for Applicants Who Need to Take the VTNE

The American Association of Veterinary State Boards (AAVSB) owns and administers the Veterinary Technician National Exam (VTNE). The VTNE is a computer-based examination that you may take during three “testing windows” per year – in summer, fall and late winter/early spring. You can find information about the VTNE – including the testing sites, dates of testing windows, and *VTNE Candidate Information Booklet* – on the [AAVSB VTNE website](#).

If you wish to qualify to take the VTNE based on Delaware’s requirements (as explained below), you must first apply to the Delaware Board for approval to sit for the VTNE. The AAVSB will **not** allow you sit for the VTNE until the Delaware Board approves your education and other qualifications. This requirement applies to **both** Delaware and out-of-state residents. After the Board reviews your application, you will be notified whether you are approved to take the examination.

After applying to the Delaware Board, you may register for the VTNE online at the [AAVSB VTNE website](#). You do **not** need to wait for the Delaware Board’s approval before registering with AAVSB. However, registering for the exam does not guarantee eligibility. Before the examination date, AAVSB will verify the eligibility of registered candidates with the Delaware Board office. If you are eligible, AAVSB will provide you with further exam information. If the Delaware Board has not approved your application, you are not eligible and will not be allowed to take the exam. *Direct all questions about the VTNE registration process to the AAVSB.*

To take the exam during a testing window, you must meet specific deadlines for applying to the Delaware Board and for registering with AAVSB. To view the deadlines for each testing window, click [Veterinary Technician National Examination](#).

Requirements for All Applicants

These requirements apply to all applicants regardless of whether applying by examination or reciprocity.

- Submit a completed, signed and notarized [Application for Licensure/Examination for Veterinary Technicians](#).
- Enclose the non-refundable application [processing fee](#) by check or money order made payable to the “State of Delaware”
 - Do not send the VTNE examination fee to the Delaware Board office! Send it to AAVSB.

- Arrange for the Board office to receive proof of **one** of the following education/experience requirements.
- Official transcript from an AVMA-accredited veterinary technician program, sent *directly* from the school to the Board office.
 - If you are a final-year veterinary technician student enrolled in an AVMA-accredited program, you may apply to take the VTNE before graduation by submitting proof of the probability of graduation. In this situation, arrange for the Board office to receive a letter from your school, sent *directly* to the Board office, stating that you are a veterinary technician student in good standing and the date on which you are expected to receive your degree. ***This letter will admit you to the VTNE, but you will not be considered for licensure until you submit proof of your graduation to the Board office.***
 - Official transcript from a foreign veterinary program approved by the AVMA, sent *directly* from the school to the Board office.
 - If you meet neither of the education requirements above, proof of completing **one of the education/experience alternatives** listed below:
 - Baccalaureate degree* in animal science-related field as approved by the Board plus 2625 hours of practical experience under the supervision of a licensed veterinarian(s),
 - Degree from a veterinary technician program that is not accredited* by the AVMA, as approved by the Board, plus 2625 hours of practical experience under the supervision of a licensed veterinarian,
 - Baccalaureate degree in biology, chemistry, psychology, physics, or similar scientific field of study* as approved by the Board plus 3500 hours of practical experience under the supervision of a licensed veterinarian(s),
 - 60 credit hours of coursework* at the postsecondary educational level, as approved by the Board, plus 5250 hours of practical experience under the supervision of a licensed veterinarian(s),
 - 7000 hours of practical experience* under the supervision of a licensed veterinarian(s).
 - Proof of the degrees listed above is an official transcript sent *directly* from the school to the Board office.
 - Proof of the hours of experience listed above is a notarized [Affidavit of Veterinary Technician Experience](#) signed by the supervising veterinarian. If the supervising veterinarian is not Delaware-licensed, he or she must submit a copy of his or her current veterinary license with the form.
 - These education/experience alternatives *expire November, 2013*. For more information on these alternatives, see Section 11.1.2 of the Board's [Rules and Regulations](#).
 - If you have already taken and passed the VTNE, arrange for the American Association of Veterinary State Boards (AAVSB) to transfer the scores to the Board office. To request a score transfer, see www.aavsb.org.
 - If you have ever held a veterinary technician license in another state, arrange for the Board office to receive a letter of good standing from each jurisdiction where you are now, *or have ever been*, licensed.

Additional Requirements for Temporary Licenses

You must meet all of the above requirements. *In addition*, submit:

- [Temporary license fee](#) by check or money order made payable to "State of Delaware."
- Letter from a Delaware-licensed veterinarian verifying that
 - you will remain in the veterinarian's continuous employ and supervision, and
 - he or she will monitor your professional activities and be fully responsible for you while you are under temporary licensure.

Under no circumstances should you begin practicing as a veterinary technician in Delaware before the temporary license is issued. For information on the practice and supervision requirements for veterinary technicians, see Section 1.0 of the Board's [Rules and Regulations](#).



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APPLICATION FOR LICENSURE/EXAMINATION FOR VETERINARY TECHNICIANS

TYPE OF APPLICATION – All applicants complete this section.

1. Select type of application you are filing:

Examination – Check your situation:

I am applying to sit for the Veterinary Technician National Examination.

I have already passed the Veterinary Technician National Examination but I do not hold a current, active Veterinary Technician license in another jurisdiction.

Reciprocity – I hold a *current, active* Veterinary Technician license in another jurisdiction (state, U.S. territory or District of Columbia).

2. Are you also applying for a temporary license? Yes No

Arrange for the Board office to receive a letter from your supervising veterinarian stating that you will remain in the veterinarian's continuous employ and that he or she will monitor your professional activities and be fully responsible for you while you are under temporary licensure.

3. Choose the category that describes your qualifications (check one):

I am a graduate of (or final-year student in) an AVMA-accredited veterinary technician program.

I graduated from an AVMA-approved foreign veterinary program.

I have an animal science-related baccalaureate degree plus 2625 hours of supervised experience.

I graduated from a non-AVMA-accredited veterinary technician program, and I have 2625 hours of supervised experience.

I have a baccalaureate degree in biology or similar scientific field plus 3500 hours of supervised experience.

I have 60 credit hours of post-secondary coursework plus 5250 hours of supervised experience.

I have 7000 hours of supervised experience.

IDENTIFYING AND CONTACT INFORMATION – All applicants complete this section.

4. Name: _____
Last/Family Name First Middle

5. Other Names Used: _____
(Include maiden, other married, alternative spellings.)

6. Date of Birth (month/day/year): _____ Gender: Male Female

7. Have you been issued a U.S. Social Security Number? Yes No **If yes, enter your SSN:** _____
If no, you must file a [Request for Exemption from Social Security Number Requirement](#).

8. **Mailing** Address: _____

City State Zip

9. Phone: _____ Email: _____
Daytime Home

EDUCATION – All applicants complete this section.

10. Are you a final-year veterinary technician student in an AVMA-accredited program? Yes No If yes, enter:
Degree Expected: _____ Anticipated Graduation Date: _____

Arrange for the Board office to receive a letter from your school, sent *directly* to the Board office, stating that you are a veterinary technician student in good standing and the date on which you are expected to receive your degree. When your final transcript is available, arrange for an official copy of it to be sent from the college *directly* to the Board office.

11. Have you completed any formal education related to veterinary technician licensure? Yes No If yes, enter the following about your education. If you need more room, enclose a separate sheet with the same information.

School Name: _____

Address: _____

Type of program (check one):

- Veterinary Technician program—AVMA-accredited
- Veterinary Technician program—Non-AVMA-accredited
- Veterinarian—AMVA-approved foreign program
- Animal Science-related
- Scientific Field of Study—Enter field: _____
- Other Post-secondary Education

Did you receive a degree? Yes No If yes, enter: Degree Received: _____
Date Received: _____

Arrange for the Board office to receive an official transcript, sent *directly* from the school to the Board office.

SUPERVISED EXPERIENCE – All applicants *other than* graduates of (or final-year students in) an AVMA-accredited veterinary technician program or graduates of an AVMA-approved foreign veterinary program.

12. Complete the following information about your hours of supervised experience.

NAME OF SUPERVISING VETERINARIAN	TOTAL HOURS

Arrange for the Board office to receive a notarized *Affidavit of Veterinary Technician Experience*, completed and signed by each *supervising* veterinarian listed, sent *directly* from the supervising veterinarian.

EXAMINATION – All applicants complete this section.

13. Have you taken and passed the Veterinary Technician National Examination (VTNE)? Yes No If yes, where did you take it? _____ When? _____ Skip to the LICENSURE/PRACTICE section.

If you did not take the VTNE in Delaware, arrange for a score report to be sent *directly* from Veterinary Information Verification Agency to the Board office.

14. *If you are applying by reciprocity* and have not passed the examination, when were you first licensed?

15. *If you are applying to take the VTNE in Delaware*, are you requesting any accommodations on the basis of disability as defined under Title II of the Americans with Disabilities Act? Yes No If yes, request further information from the Board office.

LICENSURE HISTORY– All applicants complete this section.

16. Have you ever held a veterinary technician license in another jurisdiction (state, U.S. territory or District of Columbia)? Yes No If yes, provide the following information about each veterinary technician license you have ever held:

JURISDICTION	LICENSE NUMBER	IS THIS LICENSE <i>CURRENT</i> ?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>

Arrange for *each* jurisdiction listed to send a “letter of good standing” *directly* to the Board office.

DISCLOSURES – All applicants complete this section.

- 17. Have you ever been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or any other criminal offense, including any offense for which you have received a pardon, in any jurisdiction? Yes No **If yes, submit a complete explanation and a certified copy of your criminal history record from any jurisdiction in which you have been convicted or pardoned. For information on obtaining a Delaware criminal history record, see [State Bureau of Identification](#).**
- 18. Are any criminal charges pending against you in any jurisdiction? Yes No **If yes, arrange for appropriate authorities to provide all relevant information to the Board office. The information should be sufficiently specific to enable the Board to determine whether the charge is substantially related to the practice of veterinary medicine.**
- 19. Have you received any administrative penalties, including but not limited to fines, formal reprimands, license suspension or revocation, and probationary limitations? Yes No **If yes, arrange for the jurisdiction(s) to send information about the disciplinary action to the Board.**
- 20. Have you entered into a consent agreement that places conditions on your professional conduct or practice, including any voluntary surrender of license? Yes No **If yes, arrange for the jurisdiction(s) to send information about the disciplinary action to the Board.**
- 21. Are any disciplinary proceedings or unresolved complaints concerning your practice as a veterinary technician pending against you at present? Yes No **If yes, arrange for the jurisdiction(s) to send information about the disciplinary action(s) to the Board.**
- 22. Do you have any impairment related to drugs or alcohol that would limit your ability to undertake the practice of veterinary medicine in a manner consistent with the safety of a patient or the public? Yes No **If yes, submit a letter giving a complete explanation. Include copies of all appropriate records.**

If your application requires Board review, the Board office must receive all of these items no later than 4:30 PM ten full working days before the Board’s meeting date:

- **Completed, signed and notarized application form**
- **Fee payment**
- **All required supporting documentation.**

Applications that are not complete within six months of filing may be considered abandoned and discarded.

Please note: When your application is complete, please allow 4-6 weeks to receive your license.

AFFIDAVIT

I certify that the information in this application is complete and true. I understand that the intentional inclusion of false or fraudulent information in this application, or the material omission of information which might have a bearing on licensure, may result in the denial of licensure and will be reported to the Attorney General for further action. I understand that the application and examination fees are not refundable.

Applicant Signature: _____ **Date:** _____

State of: _____ County of: _____

Sworn to and subscribed to before me this _____ day of _____, 2_____

NOTARY PUBLIC _____

AFFIX SEAL

My commission expires: _____

APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, INCOMPLETE OR NOT ACCOMPANIED BY THE REQUIRED FEE WILL BE REJECTED.



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AFFIDAVIT OF VETERINARY TECHNICIAN EXPERIENCE

Applicants for veterinary technician licensure whose application is based partially or wholly on experience should arrange for each supervising veterinarian to submit this form directly to the Board office. You may copy this form if needed.

Applicant Name: _____
Last/Family Name First Middle

EXPERIENCE INFORMATION – The supervising licensed veterinarian completes this section.

1. Supervising Veterinarian Name: _____

2. Practice Name: _____

3. Mailing Address: _____

_____ City State Zip

4. Phone: _____ Email: _____

5. Veterinary License Number: _____ State: _____

If not licensed in Delaware, submit a copy of your current license with this form.

6. Did the applicant named above work under your supervision? Yes No If yes, complete the following information about the period during which you supervised the applicant:

Start Date: _____ End Date: _____ **TOTAL HOURS SUPERVISED:** _____

AFFIDAVIT

I certify that the information in this statement is complete and true.

Supervising Veterinarian Signature: _____ Date: _____

State of: _____ County of: _____

Sworn to and subscribed to before me this _____ day of _____, 2_____

Notary Public: _____

SEAL

My commission expires: _____

The form must be notarized and sent *directly* to the Board office at the address above.